

**COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PHARMACEUTICAL USE OF NITRIC OXIDE, HEME OXYGENASE-1 AND PRODUCTS OF HEME DEGRADATION, the specification of which:

☐ is attached hereto.

☒ was filed on June 20, 2003 as Application Serial No. 10/600,182 and was amended on

☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

<u>U.S. Serial No.</u>	<u>Filing Date</u>	<u>Status</u>
60/390,457	June 21, 2002	Pending

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Janis K. Fraser, Ph.D., J.D., Reg. No. 34,819

Timothy A. French, Reg. No. 30,175

Jack Brennan, Reg. No. 47,443

John W. Freeman, Reg. No. 29,066

J. Peter Fasse, Reg. No. 32,983

Anita L. Meiklejohn, Reg. No. 35,283

Todd E. Garcia, Reg. No. 54,112

Direct all telephone calls to JANIS K. FRASER, PH.D., J.D. at telephone number (617) 542-5070.

Direct all correspondence to the following:

26161
PTO Customer Number

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: FRITZ H. BACH

Inventor's Signature: _____

Date: _____

Residence Address: Manchester-by-the-sea, Massachusetts

Citizenship: United States of America

Post Office Address: 8 Blossom Lane

Manchester-by-the-sea, Massachusetts 01944

United States of America

Full Name of Inventor: LEO E. OTTERBEIN

Inventor's Signature: _____

Date: 12/16/03

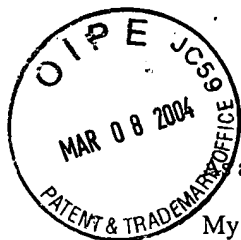
Residence Address: New Kensington, Pennsylvania

Citizenship: United States of America

Post Office Address: 910 Normandy Drive

New Kensington, Pennsylvania 15068

United States of America



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Page 2 of 2 Pages

Full Name of Inventor: FRITZ H. BACH

Inventor's Signature: 17th

Date: 2/6/04

Residence Address: Manchester-by-the-sea, Massachusetts

Citizenship: United States of America

Post Office Address: 8 Blossom Lane

Manchester-by-the-sea, Massachusetts 01944

United States of America

Full Name of Inventor: LEO E. OTTERBEIN

Inventor's Signature: _____

Date: _____

Residence Address: New Kensington, Pennsylvania

Citizenship: United States of America

Post Office Address: 910 Normandy Drive

New Kensington, Pennsylvania 15068

United States of America